REQU (THI	THIS RFQ	THIS RFQ X IS IS IS NOT A SMALL BUSINI				INESS SET ASIDE			OF PAGES			
1. REQUEST NO.	2. DATE ISSU	DATE ISSUED 3. REQUISITION/PURCHASE REQUEST NO.						1				
DTFAAC-09-R-07157				Z	AC-09-07157							
4a. ISSUED BY	AMO-210 CONTRAC	TING TEA	M	<u> </u>			5. DEL	IVERY B	Y (Date)			
FAA AERONAUTICAL CENTER							09/28/2009					
	PO BOX 25082						6. DEL	IVERY				
	MPB ROOM 312							OTHER (See Schedule)				
	OKLAHOMA CITY O	к 73125					8. DESTINATION					
								a. NAME OF CONSIGNEE				
	4b. F0	OR INFORMATION	N CALL: (No collect of					7370				
NAME			AREA CODE	TELEPHONE NUMBER  AREA CODE NUMBER				b. street address 697370 DOT FAA AML 1000				
Barbara S	Smith		405					DISTRIBUTION CENTER				
		7. TO:	·	-								
a. NAME		b. CON	MPANY	IY			6500 S MACARTHUR BLVD					
								OKLAHOMA CITY OK 731696901				
c. STREET ADDRES	SS						c. CITY	1				
							OKLAHOMA CITY					
d. CITY			e. STATE	f. ZIP CODE	=		d. STA	TE	e. ZIP CODE			
u. Citi			e. STATE	I. ZII CODI	_		OK		731696901			
	SH QUOTATIONS TO				rmation, and quotations furnished							
	OFFICE IN BLOCK 4a ON LOSE OF BUSINESS (Date)				<ul> <li>address in Block 4a. This request ission of this quotation or to contra</li> </ul>						ts	
	09 1400 CT	origi		ndicated by que	oter. Any representations and/or or							
00/13/200	J9 1400 C1	mus		•	ido applicable Federal State and li	oool toy	00)					
		OLID			de applicable Federal, State and lo			l	LINUT DE		I AMOUNT	
ITEM NO. (a)		SUP	PLIES/SERVICES (b)	5	QUANTIT (c)						AMOUNT (f)	
	POC: BJ Smith	, at bar	bara.smit	th@faa.	gov, or 405-95	4-78	397.					
	Manala Dana											
		Mark For: DTFAAC-09-R-07157										
	DTFAAC-0											
	711 +ho follo	wing ala	11505 (250	ridod o	n conarato att	aha	mon	+ \	ill ann	ומנו זו	000	
		All the following clauses (provided or						L) W	ттт арр.	ry uni	/ unitess	
	quoting from a GSA schedule.											
	COMMUNICATION TO BE EXIDERED THE FOLLOWING HADER THE TRANSPORM OF THE COMPANY OF										TETED ON	
		CONTRACTOR IS TO FURNISH THE FOLLOWING UNDER THE TERMS AND CONDITIONS SPECIFIED ON BOTH SIDES OF THIS ORDER AND IN ACCORDANCE WITH CLAUSES 6,7,8,9,37,43 OF THE										
				AND CONDITIONS", AC FO								
	THITTICHED TON	CONDITIONS , 110	101	(11 1	110	0 (01/0	, 1, 0, 1,					
	* * * NOTE TO VENDOR * * * ANY VARIATION IN INVOICING FROM THE LINE ITEM AMOUNT(S)									MOUNT(S)		
		AS SHOWN ON THIS ORDER MAY RESULT IN DELAY OF PAYMENT.										
	Continued											
	•		a. 10 CALENDAR D.	AYS (%)	b. 20 CALENDAR DAYS (%)	c.	30 CAL	ENDAR I	DAYS (%)	d. C	ALENDAR DAYS	
11. DISCOUNT	FOR PROMPT PAYMENT									NUMBER	PERCENTAGE	
		•										
NOTE: Additional pro	rovisions and representations		are	are not atta	ached					•	<u> </u>	
	12. NAME AND ADDRES	S OF QUOTER			13. SIGNATURE OF PERSON	AUTHO	RIZED 1	го		14. DATE C	PF QUOTATION	
a. NAME OF QUOT	ER				SIGN QUOTATION							
								010715				
b. STREET ADDRE	SS				a. NAME (Type or print)		16.	SIGNEF	(	h	TELEPHONE	
				a. IVANIE (1990 OI PIIIII)					AREA CODE			
c. COUNTY												
			1		<u> </u>							
d. CITY e. STATE			f. ZIP CODE	f. ZIP CODE c. TITLE (Type or print)						NUMBER		

OONTINULATION OUTET	REFERENCE NO. OF DOCUMENT BEING CONTINUED		OF
CONTINUATION SHEET	DTFAAC-09-R-07157	2	2

NAME OF OFFEROR OR CONTRACTOR

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)		AMOUNT (F)
	***Early Delivery is Acceptable***				
0001	Truck, Narrow Aisle Order Selector (Electric Forklift), 24 Volt, 3000 lb. lift capacity, 213" maximum fork height, power steering, electric power, Fork Length approx. 70" total length (from under p Headlights/strobe lights, battery/charger, part/service manuals, sideshift fixed forks - adjustable left/right ISO9000: N	4 Latforn	to	tip of fork),	
	Delivery: 09/28/2009				
NON 7540 04 450 000					NAL FORM 336 (4-86)